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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/730,461	12/05/2000	Hiroshi Kawai	P/1071-1207	8149

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NEW YORK, NY 100368403

EXAMINER

BELLAMY, TAMIKO D

ART UNIT	PAPER NUMBER
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DATE MAILED: 01/13/2003

Please find below and/or attached an Office communication concerning this application or proceeding.



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UNDER SECRETARY OF COMMERCE FOR INTELLECTUAL PROPERTY AND
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Paper No.

NOTICE OF FEE DEFICIENCY

The informality regarding the payment of the fee is indicated below in connection with

09/30, 461

- ☐ the original filing of the application and/or preliminary amendment (e.g. additional claim fees)
- ☐ the reply filed on _____ . The reply is not fully responsive to the prior Office action because of the _____ following matter(s). See 37 CFR 1.111 and 37 CFR 1.135.

EEE(S) DUE

- ☒ 1. The reply (e.g., amendment) is considered incomplete in that the funds in Deposit Account No. 50-1353 are insufficient to cover the entire fee due. The balance* is due within the time period set below.
- ☐ 2. The reply (e.g., amendment) is considered incomplete in that the Credit Card payment to cover the entire fee due to Account _____ (Card type + last 4 digits ONLY) was refused.
- The balance* is due within the time period set below.
- ☐ 3. The reply (e.g., amendment) has not been entered, since applicant has failed to remit (or authorize charge to a Deposit Account or Credit Card) the fee as indicated on the attached Patent Application Fee Determination Record. Remittance or authorization is due within the time period set below.
- ☐ 4. The filing fee of \$ _____ submitted in this application is insufficient.
A balance of \$ _____ is due for presentation of excess claims (37 CFR 1.16(b) & (c)).
- ☐ 5. Other.

Explanation (Provide specific details of the required correction in order to assist the applicant. Indicate whether a service charge has been added to the fee due):

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\$90 for 5 claims over

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Theresa Brown
Legal Instruments Examiner (LIE) or Clerk of Group

Inquires regarding this Notice should be addressed to the above at _____ (insert Phone Number).